Interim Designation of Agent to Receive Notification of Claimed Infringement

Full Legal Name of Service Provider:	orp Insurance Agency USA, Inc.
Alternative Name(s) of Service Provider (including all names under which the service provider is doing business): (see list below)	
	RECEIVED
Address of Service Provider: (see list belo	w) MAY 0 3 2000
Name of Agent Designated to Receive Notification of Claimed Infringement: Grego	COPYRIGHT OFFIC
Full Address of Designated Agent to which No or similar designation is not acceptable except where it is the location): KeyCorp, OH-O1-27-0200, 127 Public Square,	only address that can be used in the geographic
Telephone Number of Designated Agent: 216	5/689-5105
Facsimile Number of Designated Agent: 216	5/689-4121
Email Address of Designated Agent:gre	eg_poore@keybank.com
Sionature of Officer or Representative of the D	esignating Service Provider: Date: France 4,2000
Typed or Frinted Name and Title: Gregory R	. Poore, Vice President and Senior Counsel

Note: This Interim Designation Must be Accompanied by a \$20 Filing Fee Made Payable to the Register of Copyrights.

KeyCorp Insurance Agency USA, Inc., 5001 Olympic Dr., N.W., Gig Harbor, Washington 98335

